(HSQB)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: VERMONT	
ELIGIBILITY CONDITIONS AND REQUIREMENTS	
Enforcement of Compliance for Nursing Facilities	
State Monitoring: Describe the criteria (as required at \$1919(h)(2)(A)) for applying the remedy.	
X Specified Remedy	Alternative Remedy
(Will use the criteria and notice requirements specified in the regulation.)	(Describe the criteria and demonstrate that the alternative remedy is as effective in deterring non-compliance. Notice requirements are as specified in the regulations.)

TN No. 95-11 Supersedes TN No. None Effective Date: 7/1/95 Approval Date: 17